U.S. Department of Housing a	and Urban Development
Office of Public and Indian Ho	

nc030v01

Small PHA Plan Update Annual Plan for Fiscal Year: 2002

NOTE: THIS PHA PLANS TEMPLATE (HUD 50075) IS TO BE COMPLETED IN ACCORDANCE WITH INSTRUCTIONS LOCATED IN APPLICABLE PIH NOTICES

PHA Plan Agency Identification

PHA Name: Town of Murphy Housing Authority

PHA Number: NC19P030

PHA Fiscal Year Beginning: (mm/yyyy) 07/2002

PHA Plan Contact Information:

Name: Bennie Jo Palmer Phone: 828-837-6662

TDD:

Email (if available):

Public Access to Information

Information regarding any activities outlined in this plan can be obtained by contacting: (select all that apply)

X Main administrative office of the PHA PHA development management offices

Display Locations For PHA Plans and Supporting Documents

The PHA Plans (including attachments) are available for public inspection at: (select all that apply)

X Main administrative office of the PHA

PHA development management offices

Main administrative office of the local, county or State government

Public library

PHA website

Other (list below)

PHA Plan Supporting Documents are available for inspection at: (select all that apply)

X Main business office of the PHA

PHA development management offices

Other (list below)

PHA Programs Administered:

Public Housing and Section 8 Section 8 Only X Public Housing Only

HUD 50075 OMB Approval No: 2577-0226 Expires: 03/31/2002

Annual PHA Plan Fiscal Year 20

[24 CFR Part 903.7]

i. Table of Contents

Provide a table of contents for the Plan, including attachments, and a list of supporting documents available for public inspection. For Attachments, indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the title.

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Executive Summary (optional)	
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ii. Executive Summary

[24 CFR Part 903.7 9 (r)]

At PHA option, provide a brief overview of the information in the Annual Plan

1. Summary of Policy or Program Changes for the Upcoming Year

In this section, briefly describe changes in policies or programs discussed in last year's PHA Plan that are not covered in other sections of this Update.

The Town of Murphy Housing Authority has not made any major changes in its programs and policies included in last years Agency Plan. The Authority also does not intend to make any changes in its programs or policies for FY 2002.

2. Capital Improvement Needs

[24 CFR Part 903.7 9 (g)]

Exemptions: Section 8 only PHAs are not required to complete this component.

A. X Yes No: Is the PHA eligible to participate in the CFP in the fiscal year covered by this PHA Plan?

- B. What is the amount of the PHA's estimated or actual (if known) Capital Fund Program grant for the upcoming year? \$ 144,666
- C. X Yes No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete the rest of Component 7. If no, skip to next component.
- D. Capital Fund Program Grant Submissions

(1) Capital Fund Program 5-Year Action Plan

The Capital Fund Program 5-Year Action Plan is provided as Attachment C- nc030c01

(2) Capital Fund Program Annual Statement

The Capital Fund Program Annual Statement is provided as Attachment B- nc030b01

3. Demolition and Disposition

[24 CFR Part 903.7 9 (h)]

Applicability: Section 8 only PHAs are not required to complete this section.

1. Yes X No: Does t

Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If "No", skip to next component; if "yes", complete one activity description for each development.)

2. Activity Description

Demolition/Disposition Activity Description (Not including Activities Associated with HOPE VI or Conversion Activities)

1a. Development name:

1b. Development (project) number:

2. Activity type: Demolition

Disposition

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3. Application status (select one)

Approved

Submitted, pending approval

Planned application

- 4. Date application approved, submitted, or planned for submission: (DD/MM/YY)
- 5. Number of units affected:
- 6. Coverage of action (select one)

Part of the development

Total development

7. Relocation resources (select all that apply)

Section 8 for units

Public housing for units

Preference for admission to other public housing or section 8

Other housing for units (describe below)

- 8. Time line for activity:
 - a. Actual or projected start date of activity:
 - b. Actual or projected start date of relocation activities:
 - c. Projected end date of activity:

4. Voucher Homeownership Program

[24 CFR Part 903.7 9 (k)]

A. Yes X No:

Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982? (If "No", skip to next component; if "yes", describe each program using the table below (copy and complete questions for each program identified.)

B. Capacity of the PHA to Administer a Section 8 Homeownership Program

The PHA has demonstrated its capacity to administer the program by (select all that apply):

Establishing a minimum homeowner downpayment requirement of at least 3 percent and requiring that at least 1 percent of the downpayment comes from the family's resources

Requiring that financing for purchase of a home under its section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with

secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards

Demonstrating that it has or will acquire other relevant experience (list PHA experience, or any other organization to be involved and its experience, below):

5. Safety and Crime Prevention: PHDEP Plan - Not Applicable

[24 CFR Part 903.7 (m)]

Exemptions Section 8 Only PHAs may skip to the next component PHAs eligible for PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.

Yes No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?

B. What is the amount of the PHA's estimated or actual (if known) PHDEP grant for the upcoming year? \$

C. Yes X No Does the PHA plan to participate in the PHDEP in the upcoming year? If yes, answer question D. If no, skip to next component.

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D. Yes No: The PHDEP Plan is attached at Attachment _____

6. Other Information

[24 CFR Part 903.7 9 (r)]

Resident Advisory Board (RAB) Recommendations and PHA Response

- 1. X Yes No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?
- 2. If yes, the comments are Attached at Attachment (File name) nc030f01
- 3. In what manner did the PHA address those comments? (select all that apply)

The PHA changed portions of the PHA Plan in response to comments

A list of these changes is included

Yes No: below or

Yes No: at the end of the RAB Comments in Attachment ___

X Considered comments, but determined that no changes to the PHA Plan were necessary. An explanation of the PHA's consideration is included at the at the end of the RAB Comments in Attachment \underline{F} (nc030f01).

Other: (list below)

B. Statement of Consistency with the Consolidated Plan

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary).

- 1. Consolidated Plan jurisdiction: (provide name here) State of North Carolina
- 2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)
 - X The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.
 - The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.
 - X The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
 - X Activities to be undertaken by the PHA in the coming year are consistent with specific initiatives contained in the Consolidated Plan. (list such initiatives below)

 Other: (list below)

PHA Requests for support from the Consolidated Plan Agency

Yes X No: Does the PHA request financial or other support from the State or local government agency in order to meet the needs of its public housing residents or inventory? If yes, please list the 5 most important requests below:

4. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)

The NC Consolidated Plan's goals of providing decent housing, suitable living environment and

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expanding economic opportunity are consistent with and support the PHA's goals & objectives.

C. Criteria for Substantial Deviation and Significant Amendments

Amendment and Deviation Definitions

24 CFR Part 903.7(r)

PHAs are required to define and adopt their own standards of substantial deviation from the 5-year Plan and Significant Amendment to the Annual Plan. The definition of significant amendment is important because it defines when the PHA will subject a change to the policies or activities described in the Annual Plan to full public hearing and HUD review before implementation.

A. Substantial Deviation from the 5-year Plan:

The Authority's definition of "Substantial Deviation" and "Significant Amendment or Modification" with regards to its 5-Year and Annual Plan:

- S Changes to rent or admissions policies or organization of the waiting list;
- **S** additions of non-emergency work items or change in use of replacement reserve funds under the Capital Fund;
- S any change with regard to demolition or disposition, designation, homeownership programs or conversion activities

B. Significant Amendment or Modification to the Annual Plan:

Same as Substantial Deviation listed above

Attachment A

PHAs are to indicate which documents are available for public review by placing a mark in the "Applicable & On Display" column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

List of Supporting Documents Available for Review

Applicable	Supporting Document	Related Plan
& On Display		Component
On Display		
X	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
X	State/Local Government Certification of Consistency with the Consolidated Plan (not required for this update)	5 Year and Annual Plans
X	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	5 Year and Annual Plans
Х	Housing Needs Statement of the Consolidated Plan for the jurisdiction/s in which the PHA is located and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Any policy governing occupancy of Police Officers in Public Housing X check here if included in the public housing A&O Policy	Annual Plan: Eligibility, Selection, and Admissions Policies
	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public housing rent determination policies, including the method for setting public housing flat rents X check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	Schedule of flat rents offered at each public housing development X check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
	Section 8 rent determination (payment standard) policies check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
X	Results of latest binding Public Housing Assessment System (PHAS) Assessment	Annual Plan: Management and Operations

Applicable	Supporting Document	Related Plan
&	Supporting Document	Component
On Display		•
	Follow-up Plan to Results of the PHAS Resident Satisfaction	Annual Plan:
	Survey (if necessary)	Operations and Maintenance and
		Community Service &
		Self-Sufficiency
	Results of latest Section 8 Management Assessment System	Annual Plan:
	(SEMAP)	Management and
	Any required policies governing any Section 8 special housing	Operations Annual Plan:
	types	Operations and
	check here if included in Section 8 Administrative Plan	Maintenance
X	Public housing grievance procedures	Annual Plan: Grievance
	X check here if included in the public housing	Procedures
	A & O Policy Section 8 informal review and hearing procedures	Annual Plan:
	check here if included in Section 8 Administrative Plan	Grievance Procedures
X	The HUD-approved Capital Fund/Comprehensive Grant Program	Annual Plan: Capital
	Annual Statement (HUD 52837) for any active grant year	Needs
X	Most recent CIAP Budget/Progress Report (HUD 52825) for any	Annual Plan: Capital
	active CIAP grants	Needs
	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved	Annual Plan: Capital Needs
	proposal for development of public housing	recus
X	Self-evaluation, Needs Assessment and Transition Plan required	Annual Plan: Capital
	by regulations implementing §504 of the Rehabilitation Act and	Needs
	the Americans with Disabilities Act. See, PIH 99-52 (HA). Approved or submitted applications for demolition and/or	Annual Plan:
	disposition of public housing	Demolition and
	8	Disposition
	Approved or submitted applications for designation of public	Annual Plan:
	housing (Designated Housing Plans)	Designation of Public Housing
	Approved or submitted assessments of reasonable revitalization	Annual Plan:
	of public housing and approved or submitted conversion plans	Conversion of Public
	prepared pursuant to section 202 of the 1996 HUD Appropriations	Housing
	Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937	
	the Ob Housing Act of 1731	
	Approved or submitted public housing homeownership	Annual Plan:
	programs/plans	Homeownership
	Policies governing any Section 8 Homeownership program (section of the Section 8 Administrative Plan)	Annual Plan:
	(sectionof the Section 8 Administrative Plan) Cooperation agreement between the PHA and the TANF agency	Homeownership Annual Plan:
	and between the PHA and local employment and training service	Community Service &
	agencies	Self-Sufficiency
X	FSS Action Plan/s for public housing and/or Section 8	Annual Plan:
		Community Service & Self-Sufficiency
X	Section 3 documentation required by 24 CFR Part 135, Subpart E	Annual Plan:
7.	January 2 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	Community Service &
		Self-Sufficiency
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other	Annual Plan:
	resident services grant) grant program reports	Community Service & Self-Sufficiency
		Som Summeroney

Applicable	Supporting Document	Related Plan
& On Discription		Component
On Display		
	The most recent Public Housing Drug Elimination Program	Annual Plan: Safety
	(PHEDEP) semi-annual performance report	and Crime Prevention
	(Fried 22) some minum personnance report	
	PHDEP-related documentation:	Annual Plan: Safety
	Baseline law enforcement services for public housing	and Crime Prevention
	developments assisted under the PHDEP plan; • Consortium agreement/s between the PHAs participating	
	in the consortium and a copy of the payment agreement	
	between the consortium and HUD (applicable only to	
	PHAs participating in a consortium as specified under 24	
	CFR 761.15);	
	 Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, 	
	services or other in-kind resources for PHDEP-funded	
	activities;	
	 Coordination with other law enforcement efforts; 	
	Written agreement(s) with local law enforcement agencies	
	(receiving any PHDEP funds); andAll crime statistics and other relevant data (including Part	
	I and specified Part II crimes) that establish need for the	
	public housing sites assisted under the PHDEP Plan.	
X	Policy on Ownership of Pets in Public Housing Family	Pet Policy
	Developments (as required by regulation at 24 CFR Part 960,	
	Subpart G)	
	X check here if included in the public housing A & O Policy	
X	The results of the most recent fiscal year audit of the PHA	Annual Plan: Annual
A	conducted under section 5(h)(2) of the U.S. Housing Act of 1937	Audit
	(42 U. S.C. 1437c(h)), the results of that audit and the PHA's	
	response to any findings	
	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Other supporting documents (optional)	(specify as needed)
	(list individually; use as many lines as necessary)	

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5 **Table Library**

Ann	ual Statement/Performance and Evalu	ation Report			
PHA N	Name:	Grant Type and Number			Federal FY of Gra
Origin	nal Annual Statement	Reserve for Disasters/ H	Emergencies Revised Annual S	tatement (revision no:)	
T	I C	T-4-1 F-	1°	T.4.1	-4 -1 C -4
Line No.	Summary by Development Account	1 otai Es	stimated Cost	1 Otal A	Actual Cost
1100		Original	Revised	Obligated	Expended
1	Total non-CFP Funds	5 5		g	F
2	1406 Operations				-i
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 liquidated Damages	See Attachment File			
7	1430 Fees and Costs	nc030b01			
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1498 Mod Used for Development				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2-19)				
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504				
22	Compliance				
23	Amount of line 20 Related to Security				
24	Amount of line 20 Related to Energy Conservation Measures				

OMB Approval No: 2577-0226 Expires: 03/31/2002

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages

PHA Name:		Grant Type and Number Capital Fund Program #: Capital Fund Program Replacement Housing Factor #:				Federal FY of Grant:		
Development Number	evelopment General Description of Major Work Number Categories		Quantity	Total Estimated Cost		Total Actual Cost		Sta Pro
Name/HA-Wide Activities				Original	Revised	Funds Obligated	Funds Expended	V
		<u> </u>		<u></u>				
	,	<u> </u>			<u> </u>	<u> </u>	<u> </u>	
		<u> </u>	-		-	<u> </u>	<u> </u>	-
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				<u> </u>	<u> </u>		<u> </u>	
		<u> </u>			<u> </u>	<u> </u>	<u> </u>	
†		† · · · · · · · · · · · · · · · · · · ·		1		†		

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule

1							
PHA Name:		Grant	Type and Nu	mber			Federal FY of Grant:
		Capit	al Fund Progra	m #:			
					ising Easter #:		
			Capital Fund Program Replacement Housing Factor #:				
Development Number Name/HA-Wide Activities	er All Fund Obligated (Quart Ending Date)			Obligated All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates	
	Original	Revised	Actual	Original	Revised	Actual	

Capital Fund Program 5-Year Action Plan

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

Original statement Development Name Number Description of Needed Physical Improvements or Management Improvements See Attachment File nc030c01 Estimated Cost Planned Start Date (HA Fiscal Year)		CFP 5-Year Action Plan		
Number (or indicate PHA wide) Description of Needed Physical Improvements or Management Estimated Cost Planned Start Date (HA Fiscal Year)	Original statemen	t Revised statement		
Description of Needed Physical Improvements or Management Improvements Estimated Cost Planned Start Date (HA Fiscal Year)	Development	Development Name		
Improvements (HA Fiscal Year)	Number	(or indicate PHA wide)		
Improvements (HA Fiscal Year)				
See Attachment File nc030c01		ed Physical Improvements or Management	Estimated Cost	
See Attachment File nc030c01				
		See Attachment File nc030c01		
Total estimated cost over next 5 years	Total actimated cos	t over next 5 veers		

PHA Public Housing Drug Elimination Program Plan

NOT APPLICABLE

	EP Plan template (HUD 50075-PHDEP F	Plan) is to be	completed in accordance w	ith Instructions located i	in applicable PIH Notices.	
	eral Information/History					
	PHDEP Grant \$					
	ype (Indicate with an "x")	N1	N2	R		
C. FFY in wh	ich funding is requested					
	Summary of Annual PHDEP Plar					
In the space below outcomes. The su	, provide a brief overview of the PHDEP mmary must not be more than five (5) set	Plan, includ ntences long	ling highlights of major initi g	atives or activities under	taken. It may include a descrip	otion of the expected
E. Target Ar	eas					
Complete the follo	wing table by indicating each PHDEP Ta	rget Area (d	levelopment or site where ac	tivities will be conducted	d), the total number of units in	each PHDEP Target
Area, and the total	number of individuals expected to partic	cipate in PH	DEP sponsored activities in	each Target Area. Unit of	count information should be c	consistent with that
available in PIC.						
PHI	DEP Target Areas		Total # of Units within	Total Population to	1	
(Na:	me of development(s) or site)		the PHDEP Target Area(s)	be Served within the PHDEP Target	1	
			Alea(s)	Area(s)	1	
			<u> </u>	Tireu(s)	4	
					1	
					1	
<u> </u>					1	
F. Duration o	f Program					
Indicate the durati	on (number of months funds will be requi	ired) of the l	PHDEP Program proposed u	inder this Plan (place an	"x" to indicate the length of p	rogram by # of months.
For "Other", iden	tify the # of months).		3.5	•	-	
	12 Months 18 Months	24	Months			
G. PHDEP Pro	ogram History					
	hat funding has been received under the I	PHDED Drog	aram (nlace an "v" hy each a	nnlicable Veer) and prov	vide amount of funding receiv	ad If praviously funded
programs have no	been closed out at the time of this subm	ission, indic	cate the fund balance and an	ticipated completion dat	te. The Fund Balances should	reflect the balance as of
Date of Submissio	n of the PHDEP Plan. The Grant Term E					
column or "W" for	waivers.		•		_	-
1,80	mmear of Prider	Grant #	rund barance as	Grant Grant	Start Grant Term	
HUD 50075					<u> </u>	

OMB Approval No: 2577-0226 Expires: 03/31/2002

Section 2: PHDEP Plan Goals and Budget

A. PHDEP Plan Summary

In the space below, summarize the PHDEP strategy to address the needs of the target population/target area(s). Your summary should briefly identify: the broad goals and objectives, the role of plan partners, and your system or process for monitoring and evaluating PHDEP-funded activities. This summary should not exceed 5-10 sentences.

B. PHDEP Budget Summary

Enter the total amount of PHDEP funding allocated to each line item.

	=
2011 7 - 2002 (16) 11111 (2010 16) A A A A A A A	
8148 - 8887483148888	
NEAR - NOTHER PARTITION	
81 70 - FARMANIA TENERAL TENER	
M 20 - 10 10 10 10 10 10 10 10 10 10 10 10 10	
AIAH - DIVITURA TANDINA TANDIN	
9389 - 13118 545 Y 5 M 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
9189 - 13148 141547544544	
9190 - PHAS 12500 1547 Acts	
111 AL PHIRE EL WINN.	

PHDEP Plan Goals and Activities

In the tables below, provide information on the PHDEP strategy summarized above by budget line item. Each goal and objective should be numbered sequentially for each budget line item (where applicable). Use as many rows as necessary to list proposed activities (additional rows may be inserted in the tables). PHAs are not required to provide information in shaded boxes. Information provided must be concise—not to exceed two sentences in any column. Tables for line items in which the PHA has no planned goals or activities may be deleted.

9110 – Reimbursement of Law Enforcement						Total PHDEP Funding: \$			
Goal(s) Objectives									
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDE P Funding	Other Funding (Amount/ Source)	Performance Indicators		
1.									
3.									

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9115 - Special Initiative						Total PHDEP Funding: \$			
Goal(s)									
Objectives									
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount/ Source)	Performance Indicators		
1.									
2.					•				
3.									

9116 - Gun Buyback TA Match					Total PHDEP Funding: \$			
Goal(s)								
Objectives								
Proposed Activities	# of Person s Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators	
1.								
2.								
3.								

9120 - Security Personnel	Total PHDEP Funding: \$
Goal(s)	
Objectives	

Proposed Activities	# of Person s Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9130 – Employment of Investigators					Total PHDEP Funding: \$			
Goal(s) Objectives								
Proposed Activities	# of Person s Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators	
1.								
2.								
3.								

9140 – Voluntary Tenant Patrol					Total PHDEP Funding: \$			
Goal(s) Objectives								
Proposed Activities	# of Person s Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators	
1.								
2. 3.								

9150 - Physical Improvements					Total PHDEP Funding: \$			
Goal(s) Objectives								
Proposed Activities	# of Person s Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators	
1.								
2.								

9160 - Drug Prevention						Total PHDEP Funding: \$			
Goal(s) Objectives					<u> </u>				
Proposed Activities	# of Person s Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators		
1.									
2.									
3.									

9170 - Drug Intervention		Total PHDEP Funding: \$					
Goal(s) Objectives					l.		
Proposed Activities	# of Person s Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2. 3.							

9180 - Drug Treatment						Total PHDEP Funding: \$			
Goal(s) Objectives					IL.				
Proposed Activities	# of Person s Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators		
1.									
2. 3.									

9190 - Other Program Costs					Total PHDEP Funds: \$			
Goal(s) Objectives					II.			
Proposed Activities	# of Person s Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators	
1.								
2.								
3.								

Required Attachment_D_: Resident Member on the PHA Governing Board

1. Yes X No: Does the PHA governing board include at least one member who is directly assisted by the PHA this year? (if no, skip to #2)

Name of resident member(s) on the governing board:

How was the resident board member selected: (select one)?

Elected Appointed

- C. The term of appointment is (include the date term expires):
- 2. A. If the PHA governing board does not have at least one member who is directly assisted by the PHA, why not?

the PHA is located in a State that requires the members of a governing board to be salaried and serve on a full time basis

- X the PHA has less than 300 public housing units, has provided reasonable notice to the resident advisory board of the opportunity to serve on the governing board, and has not been notified by any resident of their interest to participate in the Board.

 Other (explain):
- B. Date of next term expiration of a governing board member: November, 2005

Name and title of appointing official(s) for governing board (indicate appointing official for the next position):

William N. Hughes, Mayor

Required Attachment <u>E</u>: Membership of the Resident Advisory Board or Boards

List members of the Resident Advisory Board or Boards: (If the list would be unreasonably long, list organizations represented or otherwise provide a description sufficient to identify how members are chosen.)

Terry Kindrick Grace Moses Pearl McDonald Melissia Colbert Travis Adams

ATTACHMENT G

Initial Voluntary Conversion Initial Assessment

The Murphy Housing Authority hereby certifies that it has reviewed its development's operations as public housing and has considered the implications of converting the public housing development to tenant-based assistance. The Authority has concluded that the conversion of the development is inappropriate because the removal of these two developments would not meet the necessary conditions for voluntary conversion as described at § 972.200 (c). This decision was based on the excessive cost of the conversion and the Authority's potential inability to occupy the developments if it received tenant-based assistance. The anticipated cost and workability of vouchers in our small local community is also deemed inappropriate by the Authority.